

2000 UNIFORM BUSINESS REPORT (UBR)

8/

FILED
Sep 06, 2000 8:00 am
Secretary of State

08-22-2000 90234 006 ***150.00

DOCUMENT # P99000026175

Entity Name
A.C. WILSON, INC.

P

Principal Place of Business
**12988 NORTHWEST 15TH AVENUE
 BOCA RATON FL 33486**

Mailing Address
**12988 NORTHWEST 15TH AVENUE
 BOCA RATON FL 33486**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FTA Number
05-0910351

Applied For
 Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**SPIEGEL & UTRERA, P.A.
 343 ALMERIA AVENUE
 CORAL GABLES FL 33134**

Name **HOWARD ROMER**
 Street Address (P.O. Box Number is Not Acceptable)
3850 HOLLYWOOD BLVD SUITE 402
 City **HOLLYWOOD FL** Zip **33021**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE *Howard Romer* **HOWARD ROMER** DATE *7/28/00*
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	NAME	TITLE	NAME
	<input type="checkbox"/> Delete PSTD WILSON, ANTHONY C 12988 NORTHWEST 15TH AVENUE BOCA RATON FL 33486	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition	

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and correct and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Anthony C. Wilson* **ANTHONY C. WILSON** Date **7/28/00** Daytime Phone # **561-395-4482**

CR20034 (5/00)

Attachment
Doc. # P99000026175



HOWARD ROMER & CO.
ACCOUNTANTS

3850 HOLLYWOOD BOULEVARD SUITE 402
HOLLYWOOD, FLORIDA 33021
TELEPHONE (305) 964-8692
FAX (305) 964-8059

309595

July 31, 2000

~~Division of Corporations~~
~~Uniform Business Report Filings~~
P.O. Box 1500
Tallahassee, FL 32302-1500

RE: A. C. WILSON, INC.
DOCUMENT # P99000026175

The Corporation did not receive a Uniform Business Report form for timely filing. Subsequently, the enclosed report form was received. Accordingly, we request you abate the late filing penalty and accept the enclosed check in the amount of \$150.00.

Sincerely,

TO THE STATE OF FLORIDA
FROM THE DIVISION OF CORPORATIONS
RE: A. C. WILSON, INC.
DOCUMENT # P99000026175
DATE: JULY 31, 2000